

BEST AVAILABLE COPY

Check A Box  
Patented Specimens

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO 101)

APP. NO. **107019049**

FILING DATE

APPLICANT(S)

3-04-05 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1				1	
2		1				
3		2				1
4		3			1	
5		4				1
6		5				1
7						1
8						1
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TOTAL IND.	1		1		2	
TOTAL DEP.	5		5		14	
TOTAL CLAIMS	6		6		16	

	IND.		DEP.		IND.		DEP.		IND.		DEP.	
51												
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TOTAL IND.	1		1		2		2		2		2	
TOTAL DEP.	5		5		14		5		5		14	
TOTAL CLAIMS	6		6		16		7		7		18	